

Supplemental Application Data Sheet

Application Information

Application Number:: 10/621,326
Filing Date:: July 18, 2003

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: REDOX THERAPY FOR TUMORS
Attorney Docket Number:: HOFFMAN9
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country::	United States/Israel
Status::	Full Capacity
Given Name::	Arnold
Middle Name::	
Family Name::	HOFFMAN
Name Suffix::	
City of Residence::	Rehovot
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	5 Rehov Hagra
City of Mailing Address::	Rehovot
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States/Israel
Status::	Full Capacity
Given Name::	Lee
Middle Name::	M.
Family Name::	SPETNER
Name Suffix::	
City of Residence::	Jerusalem
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	27 Hakablan Street
City of Mailing Address::	Jerusalem
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	93874
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel/Australia
Status::	Full Capacity

Given Name:: Michael
Middle Name::
Family Name:: BURKE
Name Suffix::
City of Residence:: Ramat Gan
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 61 Yosef Zvi Street
City of Mailing Address:: Ramat Gan
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 52312

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Israel	140970	01-18-01	Yes

Assignment Information

Assignee Name::
Street of Mailing Address::
City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::

Postal or Zip Code of Mailing Address::